FACILITY NAME:

IAD056504186

LOCATION:

ADVANCED HEAT TREAT CORP

RCRA ID #:

2839 BURTON AVE WATERLOO-IA-50703 7/29/94 7

# IMPACT OF FLOOD AND RAIN QUESTIONNAIRE RCRA PROGRAM

river,	Is this facility located within approximately 1/2 mile of a creek or stream? YES or NO? If YES, what is the name if?
2. A flood	Are there any visual signs that the facility was affected by waters? YES or NO? If YES, describe:
NO? I	Was the facility damaged by the flood water or rain? YES or If YES, generally describe the damage.
IF THE	E ANSWER TO QUESTION #3 IS NO, STOP HERE.
4. W	Was there any damage to inventories, products or waste at acility that would have caused the facility to generate dous waste? YES or NO?
	Were there any release of hazardous material as a result of looding? YES or NO? If yes, describe:
,	· · · · · · · · · · · · · · · · · · ·
	If the answer to question #5 is YES, has remedial activity red to address the releases? YES or NO? If YES, describe:
action potent NO? Fullesson	Were there any circumstances (e.g. design criteria) or his that the facility took that were useful in preventing tial releases or generation of hazardous materials? YES or For the purpose of this question, we are looking for the bins learned" that may be useful in future guidance, etc. If describe:
x <del></del>	



RCRA Records Center

FACILITY NAME: LOCATION: RCRA ID #:		
IF THE ANSWER TO QUESTION #4	IS NO, STOP HERE.	
8. Is the facility current as a result of the flood? Y located inside or outside or BOTH (B)? Describe the type storage.	ES or NO? Is the storage both? INSIDE (I), OUT	ge area SIDE (O) or
TYPE	AMOUNT	I, O or B
Examples: Contaminated MEK Cleaning Products	2 - 55 gal. Drums 6 spray bottles	O (Outside) I (Inside)
9. Did the facility general flood that was subsequently the type and amount of hazar	sent off-site? YES or	result of the NO? Describe
TYPE	AMOUNT	
Examples: Contaminated MEK Cleaning Products	2 - 55 gal. Drums 6 spray bottles	
OTHER COMMENTS:		

Last Revised: 1/25/91 Time to complete screening: 50 M	W
Inspector: ATHY CLUMS Primary Media:	
Date: 729/94 IAD056504186 ADVANCED HEAT TREAT CORP	
Facility Address:WATERLOO-IA-50703	
Phone (319) 232-5221	
Contact/Title: GARY SHARD	
SIC #: Process: B. Jacuum CASE HARDENING	
Office Questions:	
1) Facility description PROCESSING AND LABORATORY	
2) Does facility have an EPA ID number? Yes X No # SAME \(\sigma\)	
3) What Chemical and/or Industrial Waste (CIW) streams are generated? (list: Name, Amount generated/month, Final	
disposition) TRICHLOROETHYLENE I) EGREASER Pac	ino.
10 GAL/MONTH/HYDRITE TOUKILN FOR	(")
FUEL BLENDING Offsite	
A) Poor the forcility plantify and of their CIVI.	
4) Does the facility classify any of their CIW's as hazardous waste (HW)? Yes (please note which ones are classified as HW)	
[	
NoTRICH(OROETH VLENC) 5) Does the facility conduct any of the following on-site	
activities: Treatment/Recycling/Burning/Open Dumping	
/Landfills/Surface Impoundments? Describe: \ \ O \	
Field Observations.	
Field Observations:  6) Are CIW/HW stored on-site? Yes No	
Describe (material, approximate quantity, storage method):	
TRICHLORDETHYLENE/ 100 GALLONS (IN DEGLEAS	Machine)
	The state of the s
7) Describe condition of storage containers/tanks (open,	
damaged, unlabeled, leaking, etc.): No	
8) Are incompatible wastes stored together (acids, bases,	
solvents, cyanides)? Yes No Describe:	
9) Are there any signs of past spills/releases (dead or	
stressed vegetation, ground discoloration, stains)? Yes No_X Describe	
Desci i be	
10) Do any of the on-site Chemiçal and/or CIW/HW management	
practices concern you? YesNo_/ Describe:	
11) Recommendations and/or Additional Observations:	
	7.3

### ADVANCED HEAT TREAT CORP. - 100 Waterloo, Iowa



Photo No.: 1 Direction: Northwest Photographer: Cathy Collins

Date/Time: 07/29/94; 15:05 Description: This photograph shows the front of Advanced Heat

Treat Corp at 2839 Burton Avenue.





## Material Safety Data Sheet

The Dow Chemical Company Midland, Michigan 48674

Page: 1

CHEMICAL PRODUCT & COMPANY IDENTIFICATION

24-Hour Emergency Phone Number: 517-636-4400

Product: NEU-TRI (R) SOLVENT

22030000

Product Code: 56530

Effective Date: 05/13/94

Date Printed: 05/17/94

MSD: 000168

The Dow Chemical Company, Midland, MI 48674

Customer Information Center: 800-258-2436

2. COMPOSITION/INFORMATION ON INGREDIENTS

Trichloroethylene 1, 2-Butylene oxide Stabilizers CAS# 000079-01-6 99.4% CAS# 000106-88-7 0.5%

0.1%

3. HAZARDS IDENTIFICATION

EMERGENCY OVERVIEW

\* EMERGENCY PHONE NUMBER: (U.S.) 517-636-4400 / IN CANADA SEE ABOVE \* \*

POTENTIAL HEALTH EFFECTS (See Section 11 for toxicological data.)

EYE: May cause pain and slight eye irritation. Corneal injury is unlikely. Vapors may irritate eyes.

SKIN CONTACT: Prolonged or repeated exposure may cause skin irritation. May cause drying or flaking of skin. May cause more severe response if confined to skin.

SKIN ABSORPTION: A single prolonged exposure is not likely to result in the material being absorbed through skin in harmful amounts. Trichloroethylene may be absorbed through skin and may cause numbness in the fingers immersed in the liquid.

INGESTION: Single dose oral toxicity is low. If aspirated

(Continued on page 2, over)
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PAGE: 2

Product: NEU-TRI (R) SOLVENT

Product Code: 56530

Iffective Date: 05/13/94 Date Printed: 05/17/94 MSD: 000168

(liquid enters the lung), may be rapidly absorbed through the lungs and result in injury to other body systems. Amounts ingested incidental to industrial handling are not likely to cause injury; however ingestion of larger amounts could cause serious injury, even death.

INHALATION: In confined or poorly ventilated areas, vapors can readily accumulate and can cause unconsciousness and death. Excessive exposure may cause irritation to upper respiratory tract. Excessive exposure may increase sensitivity to epine-phrine and increase myocardial irritability (irregular heartbeats). May cause alcohol intolerance often manifested by temporary reddening of the skin called 'degreaser's flush'. Minimal anesthetic or irritant effects may be seen around 200-400 ppm. Levels in the range of 1000-2000 ppm may rapidly cause dizziness or drunkenness. Progressively higher levels or longer exposure may cause unconsiousness and death and may be immediately hazardous to life.

SYSTEMIC (OTHER TARGET ORGAN) EFFECTS: Alcohol consumed before or after exposure may increase adverse effects. Trichloroethylene is reported to have caused hearing loss in laboratory animals upon repeated exposure to extremely high concentrations (40 times the PEL and higher); however, the relevance of this to humans is unknown. Repeated exposure may cause central or possibly even peripheral nervous system effects; high levels have caused liver or kidney effects in laboratory animals.

CANCER INFORMATION: A positive carcinogenic response has occurred only in mice given large doses of trichloroethylene. Data suggest a nonmutagenic mechanism for tumor formation implying that nontoxic doses of trichloroethylene should pose little or no carcinogenic hazard for man. Butylene oxide has been shown to produce benign and malignant tumors in rats but not mice. These tumors occurred only following high exposure levels which first produced chronic respiratory tract irritation. Butylene oxide is not believed to pose a carcinogenic risk to man when handled as recommended.

TERATOLOGY (BIRTH DEFECTS): Birth defects are unlikely. Exposures having no effect on the mother should have no effect on the fetus. Did not cause birth defects in animals; other effects were seen in the fetus only at doses which caused toxic effects to the mother.

REPRODUCTIVE EFFECTS: Animal data on butylene oxide and

(Continued on page 3)
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Product: NEU-TRI (R) SOLVENT

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trichloroethylene do not suggest any reproductive hazard from exposure.

#### 4. FIRST AID

EYES: Irrigate immediately with water for at least 5 minutes.

SKIN: Wash off in flowing water or shower. Remove contaminated clothing and air thoroughly before reuse.

INGESTION: Do not induce vomiting. Call a physician and/or transport to emergency facility immediately.

INHALATION: Remove to fresh air. If not breathing, give mouth-to-mouth resuscitation. If breathing is difficult, give oxygen. Call a physician.

NOTE TO PHYSICIAN: Because rapid absorption may occur through lungs if aspirated and cause systemic effects, the decision of whether to induce vomiting or not should be made by a physician. If lavage is performed, suggest endotracheal and/or esophageal control. Danger from lung aspiration must be weighed against toxicity when considering emptying the stomach. Exposure may increase "myocardial irritability". Do not administer sympathomimetic drugs unless absolutely necessary. No specific antidote. Supportive care. Treatment based on judgment of the physician in response to reactions of the patient.

#### 5. FIRE FIGHTING MEASURES

FLASH POINT: None METHOD USED: TCC

FLAMMABILITY LIMITS

LFL: 8.0% @ 100C; 8.0% @ 25C

UFL: 44.8% @ 25C

EXTINGUISHING MEDIA: Water fog.

FIRE & EXPLOSION HAZARDS: Strong unpleasant odor. Autoignition temperature is 788F, 420C.

FIRE-FIGHTING EQUIPMENT: Wear a positive pressure self-contained breathing apparatus.

# 6. ACCIDENTAL RELEASE MEASURES (See Section 15 for Regulatory Information)

(Continued on page 4 , over)
(R) Indicates a Trademark of The Dow Chemical Company

PAGE: 4

Product: NEU-TRI (R) SOLVENT

Product Code: 56530

Effective Date: 05/13/94 Date Printed: 05/17/94 MSD: 000168

ACTION TO TAKE FOR SPILLS/LEAKS: Small spills: Mop up, wipe up or soak up immediately. Remove to out of doors. Large spills: Evacuate area. Contain liquid; transfer to closed metal containers. Keep out of water supply.

#### 7. HANDLING AND STORAGE

SPECIAL PRECAUTIONS TO BE TAKEN IN HANDLING AND STORAGE: Handle with reasonable care. Avoid breathing vapors. Store in cool place. Concentrated vapors of this product are heavier than air and will collect in low areas such as pits, degreasers, storage tanks and other confined areas. Do not enter these areas where vapors of this product are suspected unless special breathing apparatus is used and an observer is present for assistance.

#### 8. EXPOSURE CONTROLS/PERSONAL PROTECTION

ENGINEERING CONTROLS: Provide general and/or local exhaust ventilation to control airborne levels below the exposure guidelines. Lethal concentrations may exist in areas with poor ventilation.

PERSONAL PROTECTIVE EQUIPMENT
EYE/FACE PROTECTION: Use safety glasses. If vapor exposure causes eye discomfort, use a full-face respirator.

SKIN PROTECTION: Use protective clothing impervious to this material. Selection of specific items such as faceshield, gloves, boots, apron, or full-body suit will depend on operation. Remove contaminated clothing immediately, wash skin area with soap and water, launder clothing before reuse.

RESPIRATORY PROTECTION: Atmospheric levels should be maintained below the exposure guideline. When respiratory protection is required, use an approved air-purifying or positive-pressure supplied-air respirator depending on the potential concentration. For emergency and other conditions where the exposure guideline may be greatly exceeded, use an approved positive-pressure self-contained breathing apparatus or positive-pressure airline with auxiliary self-contained air supply. In confined or poorly ventilated areas, use an approved positive-pressure supplied-air respirator.

(Continued on page 5)
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#### SAFETY DATA SHEET MATERIAL

PAGE: 5

Product: NEU-TRI (R) SOLVENT

Product Code: 56530

Effective Date: 05/13/94 Date Printed: 05/17/94 MSD: 000168

EXPOSURE GUIDELINE(S): Trichloroethylene: ACGIH TLV is 50 ppm TWA, 100 ppm STEL, A5. OHSA PEL is 50 ppm TWA, 200 ppm STEL. PELs are in accord with those recommended by OSHA, as in the 1989 revision of PELs.

#### 9. PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE: Colorless liquid.

ODOR: Irritating odor at high concentrations. VAPOR PRESSURE: 60 mmHg @ 20C

VAPOR DENSITY: 4.53

BOILING POINT: 189F (87C)
SOLUBILITY IN WATER: 0.1 g/100g @ 25C

SPECIFIC GRAVITY: 1.46 @ 25/25C

#### 10. STABILITY AND REACTIVITY

STABILITY: (CONDITIONS TO AVOID) Avoid open flames, welding arcs, or other high temperature sources which induce thermal decomposition to irritating and corrosive HCl from solvent vapor. High energy ultra violet light sources such as welding arcs can cause degradation generating chlorine, hydrogen chloride and possibly phosgene, and should be avoided.

INCOMPATIBILITY: (SPECIFIC MATERIALS TO AVOID) Strong bases: caustic soda, caustic potash. Metallic aluminum and zinc powders should be avoided.

HAZARDOUS DECOMPOSITION PRODUCTS: Involvement in fire or high temperatures forms hydrogen chloride and very small amounts of phosgene & chlorine. Solvent decomposition occurs when catalyzed by metal chlorides which can be produced by reaction of HCl and metals in the system. In the presence of aluminum, the decomposition can proceed rapidly with production of large amounts of heat and HCl fumes. Contamination of solvent with small amounts of 1,1,1-trichloroethane can affect stabilizers and shorten solvent life.

HAZARDOUS POLYMERIZATION: Will not occur.

11. TOXICOLOGICAL INFORMATION (See Section 3 for Potential Health Effects. For detailed toxicological data, write or call the address or non-emergency number shown in Section 1)

ACUTE

SKIN: The LD50 for skin absorption in rabbits is approx.

(Continued on page 6, over) (R) Indicates a Trademark of The Dow Chemical Company

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10,000 mg/kg.

INGESTION: The oral LD50 for rats is 4920 mg/kg.

INHALATION: The LC50 for rats is 12,500 ppm for 4 hours.

MUTAGENICITY (EFFECTS ON GENETIC MATERIAL): For the minor component(s) butylene oxide in vitro mutagenicity studies were positive. Animal mutagenicity studies were negative. Pure trichloroethylene (without additives) lacks mutagenic potential in most tests. Using formulations (with additives), in vitro tests and tests in animals have been inconclusive.

- 12. ECOLOGICAL INFORMATION (For detailed Ecological data, write or call the address or non-emergency number shown in Section 1)
- 13. DISPOSAL CONSIDERATIONS (See Section 15 for Regulatory Information)

DISPOSAL METHOD: When disposing of the unused contents, the preferred options are to send to licensed reclaimers, or to permitted incinerators. Any disposal practice must be in compliance with federal, state, and local laws and regulations. Do not dump into sewers, on the ground or into any body or water.

#### 14. TRANSPORT INFORMATION

CANADIAN TDG INFORMATION:

For TDG regulatory information, if required, consult transportation regulations, product shipping papers, or your Dow representative.

15. REGULATORY INFORMATION (Not meant to be all-inclusive--selected regulations represented)

NOTICE: The information herein is presented in good faith and believed to be accurate as of the effective date shown above. However, no warranty, express or implied is given. Regulatory requirements are subject to change and may differ from one location to another; it is the buyer's responsibility to ensure that its activities comply with federal, state or provincial, and local laws. The following specific information is made for the purpose of complying with numerous federal, state or provincial, and local laws and regulations. See other sections for health and safety information.

#### U.S. REGULATIONS

==============

(Continued on page 7)
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Product: NEU-TRI (R) SOLVENT

Product Code: 56530

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#### REGULATORY INFORMATION (CONTINUED)

SARA 313 INFORMATION: This product contains the following substances subject to the reporting requirements of Section 313 of Title III of the Superfund Amendments and Reauthorization Act of 1986 and 40 CFR Part 372:

CHEMICAL NAME

CAS NUMBER

CONCENTRATION

TRICHLOROETHYLENE

000079-01-6 99.4

%

SARA HAZARD CATEGORY: This product has been reviewed according to the EPA "Hazard Categories" promulgated under Sections 311 and 312 of the Superfund Amendment and Reauthorization Act of 1986 (SARA Title III) and is considered, under applicable definitions, to meet the following categories:

An immediate health hazard A delayed health hazard

CALIFORNIA PROPOSITION 65: The following statement is made in order to comply with the California Safe Drinking Water and Toxic Enforcement Act of 1986: This product contains a chemical (s) known to the State of California to cause cancer. (See Section 6 of the MSDS for details on carcinogenicity.)

#### CANADIAN REGULATIONS \_\_\_\_\_

WHMIS INFORMATION: The Canadian Workplace Hazardous Materials Information System (WHMIS) Classification for this product is:

DIB - poisonous substance defined by TDG regulations

D2B - eye or skin irritant

Refer elsewhere in the MSDS for specific warnings and safe handling information. Refer to the employer's workplace education program.

CPR STATEMENT: This product has been classified in accordance with the hazard criteria of the Canadian Controlled Products Regulations (CPR) and the MSDS contains all the information required by the CPR.

(Continued on page 8, over)

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Product Code: 56530

Effective Date: 05/13/94

Date Printed: 05/17/94

MSD: 000168

#### REGULATORY INFORMATION (CONTINUED)

HAZARDOUS PRODUCTS ACT INFORMATION: This product contains the following ingredients which are Controlled Products and/or on the Ingredient Disclosure List (Canadian HPA section 13 and 14):

COMPONENTS:

CAS #

AMOUNT (%w/w)

Trichloroethylene

CAS# 000079-01-6

99.4%

16. OTHER INFORMATION

MSDS STATUS: Revised sections 3, 5, 8, 10, 11, 14, and 15.

<sup>(</sup>R) Indicates a Trademark of The Dow Chemical Company
The Information Herein Is Given In Good Faith, But No Warranty,
Express Or Implied, Is Made. Consult The Dow Chemical Company
For Further Information.

WISCONSIN
DEPT OF NATURAL RESOURCES

STATE OF WI Chapter 144, Wis. Stats. Form 4400-66P

Rev. 6-91

State of nsin Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094 Madison, Wisconsin 53708

FOR DNR USE ONLY

Ple	ease print or type. Form designed for use on elite (1	2-pitch) typewrite	r.		Form	Approv	ed. OMB No.	2050-003	39. Exp	ires 9-3	30-91
1	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's IAD056504	US EPA ID No.	Mani Docume		2. Page of	11110111	ation in required			
		oo, IA 507	03	21 92	1 0	W	I J210 te Generator	1210		ber	
	4. Generator's Phone (319 ) 232-5221 5. Transporter 1 Company Name	Kmergen	6. US EPA ID Nu	mber	4		te Transport				
	Hydrite Chemical Co.		8. US EPA ID Nu				nsporter's P		/232	-973	1
	7. Transporter 2 Company Name		W10988669				te Transport insporter's Pl			00.00	40
	9. Designated Facility Name and Site Address	s	10. US EPA ID Nu				te Facility's		00-40	17.79	77
	Hydrite Chemical Co. 114 N. Main Street Cottage Grove, WI 53527		WIDOOGARA	24			cility's Phone				
	11. US DOT Description (Including Proper Shi	inning Name, Haz		1	2. Conta	iners	Total	14. Unit		I.	
					No.	Type	Quantity	Wt/Vol	Wast	te No.	
G G	a. Waste  - -  TfiexdId// Tric	hloroethane	, ORM-A, UN28	1	loh 1	ь м	ط ماد اماد	1,	7 A	h I	
ENE	b.			- 16	02	"	0 9 11 0	† †			
R								+	4 4	1 - 1	
A T O	<b>c.</b>				гт		T 1 1 1			1 1	
R	d.										
	J. Additional Descriptions for Materials Listed	Above				K Ha	ndling Codes	for Was	tos Lie	ted Ab	OVE
	(D028) (D040) (D018)  15. Special Handling Instructions and Additional Auth. # 15122-C-54598	nal Information									
	16. GENERATOR'S CERTIFICATION: I her shipping name and are classified, packed, m plicable international and national govern sources. If I am a large quantity generator, degree I have determined to be economical available to me which minimizes the present OR, if I am a small quantity generator, I he select the best waste management method	arked, and labeled mental regulation I also certify that ly practicable and nt and future thre have made a good	and are in all respects and according to the I have a program in plus I have selected the pat to human health as faith effort to minimi	s in proper ace requirer ace to redu racticable and the env	condit nents of ice the method vironme	ion for t f the W volume a l of trea nt;	ransport by h isconsin Dep and toxicity o tment, storag	ighway a artment of waste o	of Nat	ng to ap ural Re	p- e-
	Printed/Typed Name & Position Title		Signature						I Month	Date Day	Year
¥	Karen S. Sharp, Sec/Trea		Signature				and the second	l l	1		93
T	17. TRANSPORTER 1 Acknowledgement of F	leceipt of Materia	ls							Date	,,,
TRANSP	Printed/Typed Name & Position Title	1	Signature					1	Month	Day	Year
P	18. TRANSPORTER 2 Acknowledgement of F	leceipt of Materia	ls	· · · · · · · · · · · · · · · · · · ·	~1				I	Date	
O R T E	Printed/Typed Name & Position Title		Signature	·, (				1	Month	1	Year
R	19. Discrepancy Indication Space	DRIVER	1 y w	- hull					017/	116 9	17
F A C I	20. FACILITY OWNER OR OPERATOR: Cei	tification of recei	pt of hazardous mate	rials cover	ed by t	his man	ifest except a				
L I T	noted in Item 19.			·					I	Date	
Y	Printed/Typed Name & Position Title	1	Signature		1/1	0		1	Month	Day	Year
ΕP	PA Form 8700-22 (Rev. 9-88) Previous editions ar	e obsolete. US	Copy Distribution:	1 - Gener				1 — Facili			للند
				2 — Gener	ator reta	in	F	- Facilit	ty send t	o Gener	rator

Emergency 24 Hour Assistance Telephone Number In Wisconsin (608) 266-3232

Outside Wisconsin

(800) 424-8802

6 - Transporter retain

3- Facility send to Wis. DNR Copies 1 & 3 mail to Wis. DNR at above address.

RCRIS HANDLER INFO	RMATION					
This form completed on $7/29/94$ (date) by						
(ATHY COCCINS (name of person completing form)						
PKC EMI (name of person's						
employer), TES_Repa_Contractor.						
Instructions for completing form: Completion of all items in BOLDFACE is REQUIRED; completion of other items is optional, subject to the availability of the information.						
EPA RCRA ID NUMBER: IA_IAD056504186 ADVANCED HEAT TR	EAT CORP					
1. NAME OF INSTALLATION 2839 BURTON AVE	EAT CORF					
WATERLOO-IA-50703						
2. LOCATION OF INSTALLATION (PHYSICAL ROUTE NUMBER; ADDRESS MUST BE SPECIFIC; IF NO HOW TO FIND THE INSTALLATION)  - EXAMPLES OF UNACCEPTABLE INSTALLATION ADDRESS CURTER AVE, "Hwy 49 West"  - EXAMPLES OF ACCEPTABLE ADDRESSES ARE: "123 6 on County Road EE, "J 12," "NW corner of Streets"  STREET ADDRESS: 2839 ROOM CITY/ZIP CODE: WATER COA	ECESSARY, INCLUDE DIRECTIONS ON ESSES ARE: "Box 47," "RR #3,"  Main St," "1 mile west of Hwy					
3. INSTALLATION MAILING ADDRESS(IF SA	ME AS LOCATION ADDRESS. WRITE					
"SAME"):						
STREET ADDRESS: SAMC						
CITY/ZIP CODE:	, IA					
4. INSTALLATION CONTACT PERSON: Name: CARV SHARP						
Title: PPECIDENT						
Telephone Number: Area Code (319)	232-5221					
Street Address: 28 20 RURTON						
City/Zip Code: WATER LOD	, IA <u>50703</u>					
5. OWNERSHIP INFORMATION: Name of Installation's Legal Owner: GARY SHARP Street Address: 2839 BURTON City/Zip Code: WATER COO , IA 50703 Telephone Number: Area Code (319) 232-5221						
6. RCRA REGULATED ACTIVITY APPARENTL (CHECK ALL THAT APPLY)  Hazardous waste generationHazar  Conditionally exempt small quantity ge  Transports waste for self only  Small quantity generator  Transports waste for hire  Large quantity generator  Other: (specify)	dous waste transportation					
and the second	RCRA FILE COPY					
RCRIS data entered						
BY JURY MARY SEE	DOCUMENT#					

DOCUMENT#\_

# UNITED STATES ENVIRONMENTAL PROTECTION AGENCY CONFIDENTIALITY NOTICE

Facility Name				
ADVANCE		TREA	tt Corp	
Facility Address	S			4
2839	BURTON	AVE	WATERUSO	TA
Inspector (prin	t)	Title		
CATHY	M. Co	CUINS	CHEMIC	AL ENGINEER
U.S.EPA, Region V	II, RCRA/IOWA, 726 Minne	esota, Kansas City,	KS 66101	Date 7/29/94

It is possible that the United States Environmental Protection Agency (EPA) will receive public requests for release of the information obtained during inspection of the facility above. Such requests will be handled by EPA in accordance with provisions of the Freedom of Information Act (FOIA), 5 U.S.C. 552; EPA regulations issued thereunder, 40 CFR Part 2; and the applicable statute under which the information is obtained. EPA is required to make inspection data available in response to FOIA requests, unless the Agency determines that the data contains information entitled to confidential treatment.

Any or all of the information collected by EPA during the inspection may be claimed confidential, if it relates to trade secrets or commercial or financial matters that you consider to be confidential. If you make claims of confidentiality, EPA will disclose the information only to the extent, and by the means of the procedures set forth in the regulations (cited above) governing EPA's treatment of confidential information.

To claim information confidential, you must certify that each claimed item meets  $\underline{all}$  of the following criteria (40 CFR 2.208):

- 1. Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.
- 2. The information is not, and has not been, reasonably obtained without your company's consent by other persons (other than governmental bodies) by use of legitimate means (other than discovery based on showing special need in a judicial or quasi-judicial proceeding).
- 3. The information is not publicly available elsewhere.
- Disclosure of the information would cause substantial harm to your company's competitive position.

<u>In addition</u>, within fifteen (15) calendar days of the claim, you must provide written comments in support of the claim, based on factors listed in 40 CFR 2.204(e)(4). This statement should be mailed by registered, return-receipt requested mail to the Inspector at the address listed above. Failure to submit comments by this deadline will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

At the completion of the inspection, you will be given a receipt for all materials collected. At that time you may make claims that some or all of the information is confidential and meets the criteria listed above.

## U.S.EPA INSPECTION CONFIDENTIALITY NOTICE (cont.)

Facility Name
ADVANCED HEAT TREAT CORP.
Facility Address
2839 BURTON ANE WATERLOO IA
If you are <u>not</u> authorized by your company and there is no one on the premises of the facility who is authorized to make confidentiality claims, this notice will be sent by certified mail, along with the receipt for documents, samples and other materials, to the authorized representative designated below.
Authorized Representative
Title
Address
If the authorized representative listed above requests confidential treatment they must return a statement specifying any information which should receive confidential treatment and written comments in support of the claim based on factors listed in 40 CFR 2.204(e)(4).  This statement from the authorized representative should be mailed by registered, return-receipt requested mail within fifteen (15) calendar days or receipt of the Confidentiality Notice to the Inspector at the address listed on page 1.  Failure to submit confidentiality claims and comments within the fifteen (15) day period will be deemed a waiver of the claim pursuant to 40 CFR
2.205(d)(1).
To be completed by the facility official receiving this Notice:
I have received and read this Notice.
Facility Representative Provided Notice (print) Title
GARY L SHARP PRESIDENT
Signature/Date 1

2

#### UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REOUEST FOR CONFIDENTIAL TREATMENT

REQUEST FOR CONFIDENTIAL TREATMENT
Facility Name ADVANCED HEAT TREAT CORP
2839 BURTON AUE WATERWOO TA
Information for which confidential treatment is requested:
Acknowledgement of Claimant
The undersigned requests that confidential treatment of the information described be provided in accordance with provisions of the Freedom of Information Act (FOIA), 5 U.S.C. 552; EPA regulations issued thereunder, 40 CFR Part 2; and the applicable statute under which the information is obtained. The undersigned further acknowledges that they are authorized to make such claims for their firm.
The undersigned also certifies that each claimed item described above meets all of the following criteria (40 CFR 2.208):
<ol> <li>Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.</li> </ol>
2. The information is not, and has not been, reasonably obtained without your company's consent by other persons (other than governmental bodies) by use of legitimate means (other than discovery based on showing of special need in a judicial or quasi-judicial proceeding).
3. The information is not publicly available elsewhere.

4. Disclosure of the information would cause substantial harm to your company's competitive position.

In addition, within 15 days of your claim, you must provide written comments in support of the claim, based on factors listed in 40 CFR 2.204(e)(4). Failure to submit comments by this deadline will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

Authorized Representative (print)	Signature/Date
Chy thank	- 29 Juny 94
No confidential treatment claimed during the inspec	tion:(Facility Representative's initials)
Inspector (print)	Signature/Date / /
CATHY M. COLLINS	Cally bell 7/29/94
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas Cit	y, KS 66101

(rev:1/20/93)

# UNITED STATES ENVIRONMENTAL PROTECTION AGENCY RECEIPT FOR DOCUMENTS AND SAMPLES

Facility Name
ADVANCED HEAT TREAT CORP Facility Address
2839 BURTON AVE WATERLOO TA
Documents Collected? YES (list below) NO
Samples Collected? YES (list below) NO Split Samples: YES NO
Documents/Samples were: 1)Received no charge 2)Borrowed 3)Purchased
Amount Paid: \$ Method: Cash Voucher To Be Billed
The documents and samples described below were collected in connection with the administration and enforcement of the applicable statute under which the information is obtained.
Receipt for the document(s) and/or sample(s) described below is hereby acknowledged: /
HAZARDOUS WASTE MANIFEST
MSDS FOR MEU-TRI
SOL VENT
Inspector (print)  Signature/Date  Signature/Date  Signature/Date  Occurred Signature/Date  Occurred Signature/Date
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101
(rev:1/20/93)